

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | |
|---|--|------------------------|
| UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i> | Attorney Docket No. 20050/0200894-US0 | |
| | First Inventor Satoshi Mizutani | |
| | Title | INTERLABIAL PAD |
| | Express Mail Label No. | |

| | |
|--|---|
| APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i> | ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 |
|--|---|

| | |
|---|--|
| 1. <input type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i> 3. <input checked="" type="checkbox"/> Specification [Total Pages 65] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 8] 5. Oath or Declaration [Total Sheets 1] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies |
|---|--|

ACCOMPANYING APPLICATION PARTS

| |
|--|
| 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> |
| 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> |
| 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations |
| 13. <input checked="" type="checkbox"/> Preliminary Amendment |
| 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> |
| 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> |
| 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. |
| 17. <input type="checkbox"/> Other: |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____

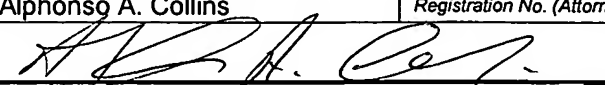
Prior application information: Examiner _____

Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

| | | | | | |
|--|--|-----------|-----------------------|----------|-----------------------|
| <input checked="" type="checkbox"/> Customer Number: 07278 OR <input type="checkbox"/> Correspondence address below | | | | | |
| Name | DARBY & DARBY P.C. Peter C. Schechter | | | | |
| Address | P.O. Box 5257 | | | | |
| City | New York | State | NY | Zip Code | 10150-5257 |
| Country | US | Telephone | (212) 527-7700 | Fax | (212) 753-6237 |

| | | | |
|-------------------|--|-----------------------------------|--------------------------|
| Name (Print/Type) | Alphonso A. Collins | Registration No. (Attorney/Agent) | 43,559 |
| Signature |  | Date | February 18, 2004 |

Application No. (if known):


Attorney Docket No.: 20050/0200894-US0

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EL99406857145 in an envelope addressed to:

MS Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on February 18, 2004
Date



Signature
Pat Campbell

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Utility Patent Application Transmittal (1 page)
Application Data Sheet (2 pages)
Specification (61 pages); Claims (3 pages); Abstract (1 page)
Figs. 1-10 (8 sheets)
Preliminary Amendment (8 pages)
Claim for Priority and Certified copies of Priority documents